Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

| CLAIMS AS FILED - PART I<br>(Column 1)                   |  |   |             |                       |                                       | mn 2)            |   | SMALL EN            | ITITY                  | OR        | OTHER THAN OR SMALL ENTITY |                        |  |
|--|--|---|-------------|-----------------------|---------------------------------------|------------------|---|---------------------|------------------------|-----------|----------------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | rt          |                       |                                       |                  |   | RATE                | FEE                    |           | RATE                       | FEE                    |  |
| FOR NUM  |  |   |             | ILED                  | NUMBER EXTRA                          |                  |   | BASIC FEE           | 355.00                 | OR        | BASIC FEE                  | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS                                  |  |   |             | us 20=                | *                                     | 5                |   | X\$ 9=              | 46                     | OR        | X\$18=                     |                        |  |
| INDEPENDENT CLAIMS 5 minus 3 =                           |  |   |             |                       | * (                                   |                  |   | X40=                |                        | OR        | X80=                       |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT                         |  |   |             |                       | -<br>-                                |                  |   | +135=               |                        | OR        | +270=                      |                        |  |
| * If the difference in column 1 is less than zero, enter |  |   |             |                       |                                       | olumn 2          | ; | TOTAL               |                        | OR        | TOTAL                      |                        |  |
| CLAIMS AS AMENDED - PART II                              |  |   |             |                       |                                       |                  |   | CMALL               | NTITY                  |           | OTHER<br>SMALL             |                        |  |
|  | er Antiocher charl   | (Column 1)<br>CLAIMS                        | (Colui      |                       |                                       |                  | 1 | SMALL               |                        | OR<br>I I | SWALL                      | ADDI-                  |  |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT             |             | NUM<br>PREVIO<br>PAID | OUSLY                                 | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                       | TIONAL<br>FEE          |  |
|  | Total  | *   | Minus       | **                    |                                       | =                |   | X\$ 9=              |                        | OR        | X\$18=                     |                        |  |
|  | Independent  | *   | Minus       | ***                   |                                       | =                |   | X40=                |                        | OR        | X80=                       |                        |  |
| Ľ.   | FIRST PRESE  | NTATION OF M                                | ULTIPLE DEF | ENDEN                 | CLAIM                                 |                  |   | +135=               |                        | OR        | +270=                      |                        |  |
|  |  |   |             |                       |                                       |                  |   | TOTAL               |                        | OR        | TOTAL                      |                        |  |
|  |  |   | ADDIT. FEE  |                       | 1                                     | ADDIT. FEE       |   |                     |                        |           |                            |                        |  |
| AMENDMENT B  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |             | HIGH<br>NUM<br>PREVI  | mn 2)<br>HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus       | **                    |                                       | =                |   | X\$ 9=              |                        | OR        | X\$18=                     |                        |  |
|  | Independent  | *   | Minus       | ***                   |                                       | =                |   | X40=                | -                      | OR        | X80=                       |                        |  |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT   |   |             |                       | CLAIM                                 |                  |   | +135=               |                        | OR        | +270=                      | ·                      |  |
|  |  |   |             |                       |                                       |                  |   | TOTAL<br>ADDIT. FEE |                        |           | TOTAL                      |                        |  |
| (Column 1) (Column 2) (Column 3)                         |  |   |             |                       |                                       |                  |   |                     |                        |           | ADDIT. FEE                 |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |             | NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR          | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |           | RATE                       | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus       | **                    |                                       | =                |   | X\$ 9=              |                        | OR        | X\$18=                     | ĭ                      |  |
| AME  | Independent  | *   | Minus       | ***                   | <del>-</del>                          | -                |   | X40=                |                        | OR        | X80=                       |                        |  |
| L  | FIRST PRESE  | NTATION OF M                                | ULTIPLE DEF | LNDEN                 | I CLAIM                               |                  |   | +135=               |                        | OR        | +270=                      |                        |  |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |             |                       |                                       |                  |   |                     |                        |           |                            |                        |  |